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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEETRANSMITTAL For FY 2009 Applicant claims small entity status. See 37 CFR 1.27 Complete if Known Application Number 10/765,782 Filing Date June 11, 2003 First Named Inventor Paul Silinger Examiner Name Luan V. Van		
FEE TRANSMITTAL For FY 2009 First Named Inventor Paul Silinger Examiner Name Luan V. Van		
For FY 2009 First Named Inventor Paul Silinger Examiner Name Luan V. Van		
Examiner Name Luan V. Van		
Applicant claims small entity status. See 37 CFR 1.27		
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Art Unit 1795		
TOTAL AMOUNT OF PAYMENT (\$) 0.00 Attorney Docket No. H0002233.33717 US - 4018		
METHOD OF PAYMENT (check all that apply)		
Check Credit Card Money Order None Other (please identify):		
Deposit Account Deposit Account Number: 500977 Deposit Account Name: Buchalter Nemer		
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)		
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing	fee	
Charge any additional fee(s) or underpayments of fee(s)		
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card	1	
Information and authorization on PTO-2038.		
FEE CALCULATION		
1. BASIC FILING, SEARCH, AND EXAMINATION FEES		
FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity Small Entity		
Application Type Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$)	(5)	
Utility 330 165 540 270 220 110	_	
Design 220 110 100 50 140 70	1	
Plant 220 110 330 165 170 85		
Reissue 330 165 540 270 650 325		
Provisional 220 110 0 0 0 ————		
2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee (\$)		
Fee Description Each claim over 20 (including Reissues) Fee (3) Fee (3) 52 26	1	
Each independent claim over 3 (including Reissues) 220 110	9	
Multiple dependent claims 390 195 Total Claims Fatra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims		
Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims - 20 or HP = x = Fee (\$) Fee Paid (\$)		
HP = highest number of total claims paid for, if greater than 20.	_	
Indep. Claims		
HP = highest number of independent claims paid for, if greater than 3.		
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or compute	r	
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional	150	
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets	id (\$)	
	Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount)		
Other (e.g., late filing surcharge):		
SUBMITTED BY		
Signature Registration No. (Attorney/Agent) Telephone 949-224-6282		
Name (Print/Type) Sandra P. Thompson Date 5111 2000		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.